

APPLICATION DATA SHEET



APPLICATION INFORMATION

Application Type:: 07/7872-1
Subject Matter::

CD-ROM or CD-R?::

Title::

REGULAR UTILITY

NONE

w-CARBOXYARYL SUBSITITUTED

DIPHENYL UREAS AS RAF KINASE

INHIBITORS

Attorney Docket Number:: BAYER 15(A)

INVENTOR INFORMATION

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name::

Family Name:: City of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

Applicant Authority Type::

Primary Citizenship Country:: Status::

Given Name::

Family Name::

City of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::
State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

INVENTOR

Germany

FULL CAPACITY

Bernd

RIEDL

Wuppertal Germany

Von-der-Glotz-Strasse 7

Wuppertal

Germany

D-42329

INVENTOR

FRANCE

FULL CAPACITY

Jacques

DUMAS

Orange

US

821 Beechwood Road

Orange CT

US

06477

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: 09/389211 REGULAR Subject Matter:: UTILITY

CD-ROM or CD-R?::

Title::

w-CAR

w-CARBOXYARYL SUBSITITUTED
DIPHENYL UREAS AS RAF KINASE

INHIBITORS

Attorney Docket Number:: BAYER 15(A)

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Germany

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

Country of Residence::

Bernd

RIEDL

Wuppertal

Germany

Street of Mailing Address:: Von-der-Glotz-Strasse 7

City of Mailing Address:: Wuppertal
Country of Mailing Address:: Germany
Postal or Zip Code of Mailing Address:: D-42329

Applicant Authority Type:: INVENTOR Primary Citizenship Country:: FRANCE

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

Country of Residence::

US

Jacques

DUMAS

Orange

US

Street of Mailing Address:: 821 Beechwood Road

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

CT

821 Beed
Orange
CT

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 06477

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: INDIA

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

Uday

KHIRE

Hamden

Country of Residence:: US

Street of Mailing Address:: 101 Tanglewood Drive

City of Mailing Address:: Hamden

State or Province of Mailing Address:: CT

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 06518

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada

Status:: FULL CAPACITY

Given Name:: Timothy
Family Name:: LOWINGER

City of Residence:: Hyogo Country of Residence:: Japan

Street of Mailing Address:: #203, 5-7, Chitose-Cho, Nishinomiya City

City of Mailing Address:: Hyogo
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 662-0046

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: William Family Name:: SCOTT City of Residence:: Guilford

Country of Residence:: US

Street of Mailing Address:: 210 Saddle Hill Drive

City of Mailing Address:: Guilford

State or Province of Mailing Address:: CT
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 06437

INVENTOR **Applicant Authority Type::** Canada **Primary Citizenship Country:**:

FULL CAPACITY Status::

Roger Given Name:: Middle Name:: Α. SMITH Family Name:: Madison City of Residence::

Country of Residence:: US

65 Winterhill Road Street of Mailing Address::

Madison City of Mailing Address::

State or Province of Mailing Address:: CT US Country of Mailing Address:: Postal or Zip Code of Mailing Address:: 06443

INVENTOR Applicant Authority Type::

US Primary Citizenship Country::

FULL CAPACITY Status::

Jill Given Name:: E. Middle Name:: Wood Family Name:: City of Residence:: Hamden

Country of Residence:: US

72 Pickwick Road Street of Mailing Address::

Hamden City of Mailing Address::

CT State or Province of Mailing Address:: US Country of Mailing Address:: 06517 Postal or Zip Code of Mailing Address::

INVENTOR Applicant Authority Type::

US **Primary Citizenship Country:**:

FULL CAPACITY Status:: Mary-Katherine Given Name:: **MONAHAN** Family Name:: Hamden City of Residence::

US Country of Residence::

134 Park Avenue Street of Mailing Address::

Hamden City of Mailing Address::

CT State or Province of Mailing Address:: US Country of Mailing Address:: 06517

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Reina
Family Name:: NATERO
City of Residence:: Hamden

Country of Residence:: US

Street of Mailing Address:: 113 Edgecomb Street

City of Mailing Address:: Hamden

State or Province of Mailing Address:: CT
Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 06518

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name::

Family Name::

City of Residence::

Country of Residence::

US

Street of Mailing Address:: 11 Wall Street # 4

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

06460

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: US

Status:: FULL CAPACITY

Given Name:: Robert
Family Name:: SIBLEY
City of Residence:: North Hay

City of Residence:: North Haven

Country of Residence:: US

Street of Mailing Address:: 1187 Mt. Carmel Avenue

Page 4

City of Mailing Address:: North Haven

State or Province of Mailing Address:: CT
Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 06473

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23599

REPRESENTATIVE INFORMATION

Representative Customer Number::

23599

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US00/00648	01/12/00
PCT/US00/00648	Non-Provisional of	60/115,877	01/13/99

ASSIGNMENT INFORMATION

Assignee Name::

Bayer Pharmaceuticals Corporation

Street of Mailing Address::

400 Morgan Lane

City of Mailing Address::

West Haven

State or Province of Mailing Address::

CT

Country of Mailing Address::

USA

Postal or Zip Code of Mailing Address::

06516